| Harder H. Bancawerk Reduction Act of 1995, no persons are required  | U.S. Patent and     | Approved for use through | h 09/30/2007<br>PARTMENT | OF COMMERCE |
|---|---------------------|--------------------------|--------------------------|-------------|
| Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)  |                     | Docket Number (Optional) |                          |             |
| FY 2006   |                     | OSTEONICS 3.0-466        |                          |             |
| ENT(Ses pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)   |                     |                          |                          |             |
| Application Number 10/678,352-Conf. #1797   |                     | Filed O                  | ctober 3, 2              | 2003        |
| For EXPANDABLE AUGMENT TRIAL  |                     |                          |                          |             |
| Art Unit 3738   |                     | Examiner                 | D. H. W                  | 'illse      |
| This is a request under the provisions of 37 CFR 1.13 identified application.   |                     |                          | -                        |             |
| The requested extension and fee are as follows (che   | ck time period desi | red and enter the app    | oropriate f              | ee below):  |
|   | <u>Fee</u>          | Small Entity Fee         |                          |             |
| X One month (37 CFR 1.17(a)(1))   | \$120               | \$60                     | \$                       | 120.00      |
| Two months (37 CFR 1.17(a)(2))  | \$450               | \$225                    | <b>\$</b> _              | <u>-</u>    |
| Three months (37 CFR 1.17(a)(3))  | \$1020              | \$510                    | \$_                      |             |
| Four months (37 CFR 1.17(a)(4))   | \$1590              | \$795                    | \$ _                     |             |
| Five months (37 CFR 1.17(a)(5))   | \$2160              | \$1080                   | \$                       |             |
| Applicant claims small entity status. See 37 0  | CFR 1.27.           |                          |                          |             |
| A check in the amount of the fee is enclosed.   |                     |                          |                          |             |
| Payment by credit card. Form PTO-2038 is attached.  |                     |                          |                          |             |
| X The Director has already been authorized to charge fees in this application to a Deposit Account.   |                     |                          |                          |             |
| The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number12-1095 I have enclosed a duplicate copy of this sheet.               |                     |                          |                          |             |
| I am the applicant/inventor.  |                     |                          |                          |             |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).   |                     |                          |                          |             |
| attorney or agent of record. R  | tegistration Number | r <u>54,230</u>          |                          |             |
| attorney or agent under 37 CF Registration number if acting un  |                     |                          |                          |             |
|   |                     | September 18, 2007       |                          |             |
| Signature   |                     | Date                     |                          |             |
| Kevin M. Kocun  |                     | (908) 518-6383           |                          |             |
| Typed or printed name Telephone Number  |                     |                          |                          |             |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. |                     |                          |                          |             |
| Total of 1 forms are subm   | nitted.             |                          |                          |             |

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120.00 DA

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: September 18, 2007

Signature:

(Kevin M. Kocun)